



# *The 375th Medical Group* *Healthy Communications*



---

*Winter* 2002

---

Welcome to the first addition of the quarterly publication, Healthy Communications. This is being sent directly to you in an effort to keep you informed of the wonderful services available through the hospital at Scott Air Force Base.

If you would like to see information on a particular topic, or if you have comments related to this publication, please email me at: [Lisa.Carducci@medgrp.scott.af.mil](mailto:Lisa.Carducci@medgrp.scott.af.mil) Thank you.



## **375 MDG Passes Its Physical!**

Bells, whistles, and cheers were heard throughout the hospital last week when the results were announced, and the 375th Medical Group was being congratulated on its high marks! Representatives from both the international healthcare accreditation agency and the Air Force Inspection Agency were at Scott AFB, 5-7 December, to assess the medical group's compliance with Air Force and healthcare standards for safe, quality patient care.

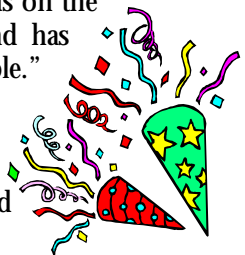
After extensive review by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) surveyors and the Health Services Inspection (HSI) team, the medical group was awarded preliminary scores of "94" and "86" respectively. The hospital received a 3-year accreditation by JCAHO.

"The medical team, under the leadership of Colonel Thomas Massello, has done a tremendous job serving the community with world-class healthcare and excellent customer service, and the JCAHO/HSI teams have validated that," according to Col Thomas Stickford, 375th Airlift Wing Commander.

JCAHO evaluates nearly 18,000 healthcare organizations and programs internationally. JCAHO accreditation is recognized internationally as a symbol of quality that reflects an organization's commitment to meeting certain performance standards in patient care and safety. The medical group's accreditation survey score of "94" far exceeds the national average of "88-89."

The Air Force Inspection Agency performs an HSI on all active duty, Reserve, and Guard medical units worldwide. The HSI assesses medical readiness, management effectiveness, and quality of healthcare delivery at all Air Force medical units. At Scott, the HSI Team Chief commented that, "the 375th was on the receiving end of a more stringent grading protocol than has been used in the past and has received an overall rating of 'Mission Ready' which is the highest (verbal) rating available." The average numerical score is "84" -the 375th Medical Group earned an "86."

In summary, Colonel Massello stated, "I am more than pleased with the outcome of the inspections and the wonderful team of professionals here at Scott. Our mission is, and always will be, to provide the best healthcare and customer service to our patients."



# Cardiovascular Risk In Patients With Diabetes

By Capt Gerald Hall, Health Care Integrator

Patients with Type 2 diabetes are at increased risk for heart disease. Although you can't change the fact that you have Type 2 diabetes, there are things you can do to reduce your health risk..



The great news is you can make a difference and start today! To decrease your risk:

- ☒ Eat right — Watch your meal portions
- ☒ Decrease high carbohydrates
- ☒ Keep your cholesterol in good range
- ☒ Monitor your blood sugar to keep it within a normal range
- ☒ Establish an exercise program

Your Provider, Nurse, Health Care Integrator or Dietician will be glad to make sure you get this critical information in a manner that suits your learning style. Contact us through the nurse help lines:

**Primary Care 256-7365**

**Internal Medicine 256-7485**

**Family Practice 256-3711**

Lastly is exercise. The best thing to do is pick something you enjoy in an environment you trust and start with an easy to reach goal and increase with time. The recommendations are for 20 minutes of sustained activity, 3-5 times a week, which elevates your heart rate. You can accomplish this by a less than vigorous paced walk. You can call at **256-7007** or visit the Health and Wellness Center to get assistance in designing a program that best fits your needs.

## Why Case Management?

By Major Gloria Bowden, Outcomes Mgt Flight Commander

You are entitled to service that is tailored to meet your individual health care needs. You should have an advocate who is dedicated to helping you ensure that your needs and those of your family are met in the event of an illness or hospitalization. The TRICARE health benefits system can be confusing and overwhelming. Case management is a service available to help you and your family navigate the TRICARE health care system.

Case management is an ongoing monitoring process led by a registered nurse who ensures you receive quality care provided in the most expeditious and cost-effective manner possible. It is designed to assist you with the acquisition of health care services. Examples of these health care services include:

1. Assistance with community placement for those needing a skilled nurse or standard nursing home.
2. Acquisition of medical equipment and home care services.
3. Linkage to local, state or DoD resources that may provide financial assistance.



The nurse case management team works directly with your Primary Care Manager (PCM) and the TRICARE Health Care Finders (HCF) to facilitate appropriate specialty care referrals. The nurse case manager manages your patient education, leads you in planning and coordinating discharge to alternate care levels, and ultimately serves as your advocate for service. You may contact a case manager through your PCM or call directly at 256-7009.



## Top 5 Frequently Asked Questions At Our TRICARE Service Center...

### 1. Does the active duty sponsor need to enroll even though they are considered automatically TRICARE Prime?

Yes. The active duty sponsor must visit the TRICARE Service Center to fill out an enrollment application, which will effectively transfer their enrollment from one region to another. They also need to update DEERS on themselves and their family at the local MPF (DEERS or ID card center).

### 2. I'm TRICARE Standard. How can I get care in the MTF?

Care is available only on a space available basis, which is very limited for non-enrollees. If you are not enrolled in TRICARE Prime or Plus, you are not guaranteed access to care at Scott.

### 3. I'm going to be on vacation. How do I receive care?

For emergency care, go to the nearest emergency room, not urgent care center. If you need routine care, you must contact your PCM before care can be authorized or after hours call 1-800-941-4501 and talk to the HCIL (nurse advice line).

### 4. What must I do to get my newborn enrolled into TRICARE Prime?

First go to DEERS to register your child. You can use the hospital complimentary birth certificate. Then come to the TRICARE Service Center to enroll your newborn into Prime. This needs to be accomplished within the first 120 days after the delivery to be effective on the date of birth.

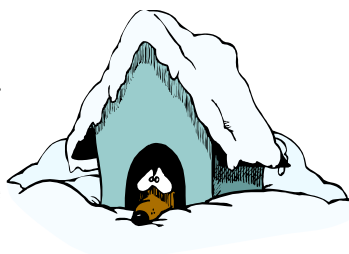
### 5. When I retire from the military, what must I do to remain in Prime?

You will need to fill out a new Prime enrollment form and make the initial payment between the 1st and 20th of the month to be effective the next month. Please make sure that your DEERS is updated and you and your family members get new ID cards. Example: If you retire 1 Feb 02 you will need to enroll and make payment on or before the 20th of Jan 02. Coverage would be seamless with an effective date of 1 Feb 02.

## The Blues of Winter

By Major Nathalie F. Ellis, Director of Case Management

The weather is colder and the days are shorter, sure signs of winter. For some, there is a sense of excitement associated with the beginning of winter. For others, there is a different reaction, they feel a strong urge to hibernate. For approximately 6% of the population who suffer from Seasonal Affective Disorder (SAD), winter heralds the onslaught of symptoms that can begin in September and last until May.



Some common symptoms of SAD include:

- |   |  |  |
|---|--|--|
| <input checked="" type="checkbox"/> Weight gain                   | <input checked="" type="checkbox"/> Fatigue                  | <input checked="" type="checkbox"/> Changes in appetite (e.g. sweets & starches) |
| <input checked="" type="checkbox"/> Problems with concentration   | <input checked="" type="checkbox"/> Irritability             | <input checked="" type="checkbox"/> Loss of interest in pleasurable activities   |
| <input checked="" type="checkbox"/> Reluctance to leave the house | <input checked="" type="checkbox"/> Increased need for sleep |  |

SAD is more common in women, but can affect men too.

If you have suffered from these symptoms at the onset of winter for more than two years, see your Primary Care Manager. There are a number of treatments that have been shown to be effective. Don't let another winter get you down.

## CARPAL TUNNEL SYNDROME

By Robert I. Swanson, MSgt, Certified Occupational Therapy Assistant

Carpal Tunnel Syndrome (CTS) is a condition that develops when repetitive wrist motions, fluid retention, pregnancy, or acute traumas create pressure on the median nerve within the carpal tunnel area of the wrist. Some common complaints from CTS sufferers are, “My hands wake me up at night,” “I feel like I’m going to drop things,” or “My fingers feel numb and tingly.” Poor grip strength is also a common sign.

Frequent breaks from activities that cause CTS is one of the most important steps in the prevention and treatment of CTS. Several studies have found that after just one minute of exercising, the pressure on the median nerve is reduced for up to several hours in some cases. These exercises should be performed approximately 2-3 times per day and 4-5 repetitions for each exercise. These exercises will only take about 1-2 minutes each time you perform them.

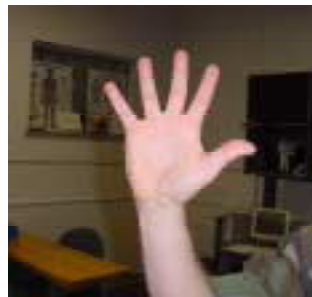
1. Make a tight fist and hold for 5-10 seconds.



2. While continuing to make a fist, slowly roll your finger back while keeping the last two joints flexed. If done correctly, your fingers will appear to make a “hook.” Hold for 5-10 seconds.



3. Now extend all your fingers and spread them apart. Hold for 5-10 seconds.



Treatment, prevention measures, and medicines prescribed by your doctor (or even surgery as a last resort) may normally help to relieve your symptoms. Wrist splints, in conjunction with the exercises, are another way to treat CTS. However, returning to the same activities without modifications may cause your symptoms to return.

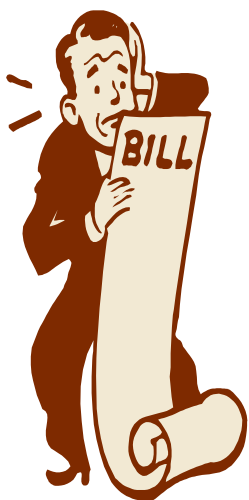
To help prevent the return of CTS, an ergonomics evaluation by Bioenvironmental Engineering may be appropriate. Here are some simple recommendations to get you started. Look at this workstation example. Remember when Mom used to say, "Sit up straight!" Well, she was right. Raise your monitor and place it directly in front of you. Your eyes should be viewing the top portion of the screen. Don't type looking down or at an angle. You may want to even use a document holder attached to your monitor. Type with your splints on or adjust the keyboard to keep your wrists neutral. Try bringing the mouse closer to you. A keyboard and mouse pad will help. Be sure not to press down on the pads. The pads are reminders to keep your wrists neutral, not a "wrist press." A good chair with some lumbar support will make you more comfortable. A footrest reminds you to sit up straight in your chair. Use an old 3-ring binder if you're not picky. Remember that frequent breaks are the first step in the prevention and treatment of CTS.



The Medical Group's Occupational Therapy Department has a great carpal tunnel program. Early intervention is the key to success. Prior to this program, many patients had surgery to alleviate their pain, but since this outpatient treatment program was started, 85% of patients see an improvement in their symptoms without needing surgery.

If you feel that you are suffering from Carpal Tunnel Syndrome, please see your Primary Care Manager.


### **Are you having difficulty getting your medical claims paid?**



The 375 MDG has a Debt Collection Assistance Officer (DCAO) to help beneficiaries understand and get assistance with debt collection problems related to TRICARE claims. Although the DCAO cannot provide you with legal advice or fix your credit rating, he will research your claims and provide you a written resolution to your collection problem. He will also notify the collection agency that action is being taken to resolve the issue.

If you visit the DCAO, remember to bring all paperwork associated with the collection action. This includes debt collection letters, TRICARE explanation of benefits (EOB), and medical/dental bills from providers. The more information you can provide, the faster it will be to determine the cause of the problem.

For more information contact the 375th Medical Group's DCAO, MSgt David Hummel, at 256-7699.



**Help give the gift of life through the Scott Blood Program.**

**We will be at the new Teen Center:**

**February 20th and March 20th**

**9 am - 4 pm**

## Sit Still!

By Capt Molinda Chartrand, Staff Pediatrician

Occasionally, we may all have difficulty sitting still, paying attention or controlling impulsive behavior. For some kids, however, the problem is so pervasive and persistent that it interferes with their daily life, including home, academic and social settings.

Approximately 4 - 6% of school aged children in the United States are diagnosed with Attention Deficit/Hyperactivity Disorder. Typically, AD/HD symptoms arise in early childhood and are inappropriate for the developmental age of the child. Some symptoms include difficulty sustaining attention, not listening, struggling with follow through on instructions, fidgeting, difficulty waiting turn, and excessive running, jumping or talking.

Determining if a child has AD/HD is a multifaceted process. Many biological and psychological problems can contribute to symptoms similar to those exhibited by children with AD/HD. There is no single test to diagnose AD/HD. That is why the Pediatric Clinic at Scott AFB offers an AD/HD Referral Clinic. Using a team approach, we will perform a thorough evaluation on children that are referred to the clinic. The child, parents and school are all integral members of the team. Counseling for parents and children, with special emphasis on behavioral intervention strategies, is also available.

If you have concerns about your child's ability to function in school, at home and with friends see your Primary Care Manager today. Together you can decide if a referral to the ARC is the right thing.

For more information on AD/HD please see the following resources:

**CHADD-A national support group for adults and children with AD/HD: [www.chadd.org](http://www.chadd.org)**

**The National Attention Deficit Disorder Association: [www.add.org](http://www.add.org)**

Parents interested in starting a CHADD chapter here at Scott, please contact Capt Szewczyk at 256 - 7878.



What are you made of? Sit in our BOD POD and find out! This egg shaped capsule uses air displacement technology to accurately and safely measure body fat! The BOD POD is based on the same basic principle as underwater weighing (density measurement), but uses air instead of water. A complete test with printed results can be completed in less than 5 minutes. Call the HAWC for more details! **256-7139**





## The Pediatric Clinic Is Stuck On Healthcare

It is a New Year and the Pediatric Clinic remains committed to your child's healthcare. Last year, we started several exciting new services at the clinic. First and foremost is our point of service immunization clinic. We provide routine childhood immunizations on a walk-in basis from 8:00 am - 4:00 pm every day. If your child has asthma, Ms. Edens--our Asthma Educator, can help you and your child take control of asthma—ask your PCM for a referral. Sore throat? Is Strep going around the school? Walk in to the Pediatric Rapid Strep clinic between 8:00 am - 11:00 am and know if your child has strep throat in under 10 minutes—no appointment necessary. Future plans include having a certified lactation consultant to help new moms with breastfeeding.

## Gain Control of Your Asthma

By Capt Gerald Hall, Health Care Integrator

Are you or one of your loved ones affected by asthma? Asthma is a serious lung disease, but did you know that there are some actions that you can take to help gain control? Yes, you can learn to recognize and avoid triggers, recognize symptoms, and know how to treat or prevent symptoms. If these measures are taken, you can significantly change the impact asthma is having on your family. This is true even if your asthma is mild.

What is asthma? Asthma makes the sides of the airways in your lungs inflamed or swollen all the time. The asthma airway reacts to things like smoke, dust, pollen, cold air, or other triggers. These triggers cause your airways to narrow or become smaller and you get common symptoms like:

- |   |  |
|---|--|
| <input checked="" type="checkbox"/> Coughing            | <input checked="" type="checkbox"/> Wheezing (a whistling noise when you breathe)                                    |
| <input checked="" type="checkbox"/> Shortness of breath | <input checked="" type="checkbox"/> Chest tightness (the feeling that someone is squeezing or sitting on your chest) |

Some of the warning signs are going to be common cold and allergy symptoms, so it is important to know the symptoms and how to treat or prevent them. The great news is that a key to proper treatment and prevention is medication.

What are triggers? Triggers are the things that start or prompt your/your loved ones to have asthma symptoms. A trigger can be an allergy, cold symptom, or something in the environment. It typically will take exposure to more than one trigger at the same time unless it is a severe allergy or irritant. An example would be exercising on a cold day with cold symptoms. If not adequately prepared, this combination can cause most asthmatics to have symptoms. Your healthcare team can help you identify your triggers and how to avoid or control them.

You can control symptoms or reverse them if you respond quickly to the warning signs of an asthma episode with medication. Your Primary Care Physician, Nurse, or Health Care Integrator can explain your medications — how and when to take them. People with more than mild asthma should have the folks at Scott design an asthma action plan that will tell you what to take every day, what symptoms to watch for, when to increase or add medications and most importantly when to get to the hospital.

If you need more information or would like an action plan, contact your clinic and set up a visit.

## Quick Reference Phone Numbers

★ Beneficiary Counseling & Assistance 256 - 7545 or 7664	★ Hospital Information (618) 256 - 7500 <i>or</i> DSN 576 - 7500	★ Pharmacy - Main 256 - 7371
★ Debt Collection Assistance Officer 256 - 7699	★ Internal Medicine Clinic 256 - 7585	★ Pharmacy - Mail-in 1 - 800 - 903 - 4680
★ Dental Clinic 256 - 1846/3321	★ Life Skills Support Center 256 - 7386/6277	★ Pharmacy - Phone In Refill 256 - 7400
★ Family Practice Clinic 256 – 7311 / 7312 / 7647 / 3160	★ Managed Care 256 - 7700	★ Primary Care Clinic (Advice Line) 256 - 7365
★ Flight Medicine Clinic (Advice Line) 256 - 7426	★ Pathology (Lab) 256 - 7465	★ Primary Care Clinic (Appointments) 256 - 7364
★ Flight Medicine Clinic (Appointments) 256 - 7425	★ Patient Administration 256 - 7522	★ Referral/Case Management 256 - 7521
★ Health & Awareness Center HAWC 256 - 7139	★ Pediatric Clinic (Advice Line) 256 - 7465	★ TRICARE Claims Office 1 - 800 - 493 - 1613
★ Health Care Information Line (HCIL) 1 – 800 – 941 – 4501, option 3	★ Pediatric Clinic (Appointments) 256 - 7566	★ TRICARE Service Center 1 - 800 - 941 - 4501

For more information, please access the Med Group website at:  
**<https://public.scott.af.mil>**